U.S. Department of Education

Staff Report to the Senior Department Official on Recognition Compliance Issues

RECOMMENDATION PAGE

1. **Agency:** American Dental Association (1952/2012)

(The dates provided are the date of initial listing as a recognized agency and the date of the agency's last grant of recognition.)

- 2. **Action Item:** Compliance Report
- 3. <u>Current Scope of Recognition</u>: The accreditation of predoctoral dental education programs (leading to the D.D.S. or D.M.D. degree), advanced dental education programs, and allied dental education programs that are fully operational or have attained "Initial Accreditation" status, including programs offered via distance education.
- 4. Requested Scope of Recognition: Same as above.
- 5. **Date of Advisory Committee Meeting:** June, 2013
- 6. **Staff Recommendation:** Renew the agency's recognition for a period of four years.
- 7. **Issues or Problems:** None.

EXECUTIVE SUMMARY

PART I: GENERAL INFORMATION ABOUT THE AGENCY

The Commission on Dental Accreditation (CODA) is a programmatic accreditor. The agency's accrediting activities include the accreditation of predoctoral dental education programs (leading to the D.D.S or D.M.D degree), advanced general dentistry education programs, advanced dental specialty education programs, and the allied dental education programs, including dental assisting education programs, dental hygiene education programs and dental laboratory technology education programs and those developing programs that have attained the initial accreditation status, and those programs offered via distance education.

The agency accredits more than 1,450 programs currently covering 21 dental education areas. Recognition by the Secretary allows the programs accredited by CODA to participate in Federal programs other than Title IV, specifically, the Public Health Service Act (PHSA) administered by the Department of Health and Human Services. The PHSA defines eligible programs as programs that offer post-doctoral training in the specialties of dentistry, advanced education in general dentistry, or dental general practice residencies that have been accredited by the Commission on Dental Accreditation. Postdoctoral dental education programs are programs sponsored by a school of dentistry and are among the programs specifically included in the definitions covered by the various sections of PHSA. Specific sections of the PHSA include, for example, Title 42, Public Health Service Act, (PHSA) Subchapter B Medicare Program Part 405-426 which provides direct and indirect graduate medical education funding/hospital insurance for residency programs approved by the Commission on Dental Education; and Title VII, Health Professions Education Section of the Public Health Service Act, Part B (Section 736) of the Centers of Excellence which includes schools of dentistry as eligible entities and Part C (Section 737) which entails training in Family Medicine, General Internal Medicine, General Pediatrics, Physician Assistants, General Dentistry, and Pediatric Dentistry,

The agency has a non-Title IV federal link and does not have to meet the separate and independent requirements.

Recognition History

The U.S. Commissioner of Education listed the Council on Dental Education (CDE) of the American Dental Association (ADA) on the first list of nationally recognized accrediting agencies published by 1952. In 1969, the Secretary expanded the CDE's scope of recognition to include the category "accreditation eligible" to the dental and dental hygiene programs. In 1972, CDE received an expansion of scope to include its accreditation of advanced dental specialty education programs and its accreditation of dental assisting and dental laboratory technician programs in proprietary schools.

In 1975, the Council on Dental Education restructured and became the Commission on Accreditation of Dental and Dental Auxiliary Educational Programs (CADDAEP). The name of the CADDAEP changed again in 1979, to its present name, the Commission on Dental Accreditation (CODA or Commission). The Secretary of Education has continued to recognize the agency since then.

The last full review of the agency was conducted at the June 2012 National Advisory Committee on Institutional Quality and Integrity (NACIQI or the Committee) meeting. Department staff and the Committee both recommended, and the Secretary concurred, that the agency's recognition be continued that it submit a compliance report addressing the issues identified in the staff analysis. This analysis is a review of that compliance report.

PART II: SUMMARY OF FINDINGS

§602.15 Administrative and fiscal responsibilities

The agency must have the administrative and fiscal capability to carry out its accreditation activities in light of its requested scope of recognition. The agency meets this requirement if the agency demonstrates that-(a) The agency has--

- (6) Clear and effective controls against conflicts of interest, or the appearance of conflicts of interest, by the agency's--
 - (i) Board members;
 - (ii) Commissioners;
 - (iii) Evaluation team members;
 - (iv) Consultants:
 - (v) Administrative staff; and
 - (vi) Other agency representatives; and

When the agency was last reviewed, it was required to demonstrate that all documents displaying its conflict of interest policy contain the same requirements written in its Evaluation and Operational Policies and Procedures Manual (EOPP). Specifically, there was an inconsistency noted between (EOPP) and conflict of interest statements placed in Commission meeting agendas.

In its response, the agency informs department staff that in has made corrections to its publications to address the compliance issue. The conflict of interest policy in the EOPP manual has been amended, specifically requiring Commissioners, review committee members, and appeal board members to leave the room when any of the conflicts of interest listed in the EOPP manual exist. The conflict of interest policy contained in the EOPP manual and the attached Commission meeting agenda are aligned reflecting the agency's current policy, demonstrating the compliance issue has been addressed.

§602.16 Accreditation and preaccreditation standards

- (a) The agency must demonstrate that it has standards for accreditation, and preaccreditation, if offered, that are sufficiently rigorous to ensure that the agency is a reliable authority regarding the quality of the education or training provided by the institutions or programs it accredits. The agency meets this requirement if -
 - (1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

(a)(1)(ix) Record of student complaints received by, or available to, the agency.

When the agency was last reviewed, it was found out of compliance with this criterion. The agency was required to demonstrate the application of its revised site visit evaluation reports, as evidence of its having an effective mechanism to assessing a program's record of student complaints or provide the date when the revised site visit evaluation reports would be in effect. The agency has provided two of its revised site visit reports as evidence that went into effect fall 2012 to address the compliance issues.

The site visit report for Henry M. Goldman School of Dental Medicine, under compliance with Commission policies notes that a thorough review of the program's complaint records was conducted and there were no patterns or themes related to the program's compliance with the agency's accreditation standards. In contrast, the site visit report for Banner Good Samaritan Medical Center under this same section explains that a review of the agency's complaint records did identify areas of non-compliance with the agency's accreditation standards.

§602.17 Application of standards in reaching an accrediting decision.

The agency must have effective mechanisms for evaluating an institution's or program's compliance with the agency's standards before reaching a decision to accredit or preaccredit the institution or program. The agency meets this requirement if the agency demonstrates that it--

- (f) Provides the institution or program with a detailed written report that assesses--
 - (1) The institution's or program's compliance with the agency's standards, including areas needing improvement; and
 - (2) The institution's or program's performance with respect to student achievement;

and

When the agency was last reviewed, it was required to demonstrate that it provides its programs (including those that meet its Institutional Effectiveness standard) with a detailed written report that assesses the program's performance with respect to student achievement.

The attached site visit report for the Veterans Affairs Medical Center does provide the program with a detailed written assessment of its compliance with the agency's Institutional Effectiveness Standard. In this case, the agency was found to be compliant with the standard and the written assessment discusses

the details surrounding the site team's favorable recommendation.

PART III: THIRD PARTY COMMENTS

Staff Analysis of 3rd Party Written Comments

There was one third-party written comment received in conjunction with the compliance report submitted by the Commission on Dental Accreditation (CODA).

The written comments, submitted by the American Dental Hygienists Association (ADHA), are related to conflicts of interest; rigor of accreditation and preaccreditation standards; and application of standards in reaching accrediting and preaccrediting decisions.

Regarding conflicts of interest, the ADHA contends that the current representation of accredited dental hygiene programs by one ADHA-appointed commissioner on the 30-member commission does not adequately represent a fair and balanced representation of the 334 accredited dental hygiene programs, which make up approximately 23% of the CODA-accredited dental and allied dental programs. The ADHA contends that the over-representation of dentists leads to skewed decision-making in favor of organized dentistry, to the detriment of dental hygienists. The ADHA also discusses its most recent efforts to increase the number of dental hygienists on the CODA by following the processes and procedures outlined in ADA policy. Based on an "unsubstantiated" recommendation from the ADA Standing Committee on Quality Assurance and Strategic Planning, the CODA denied the request.

Given the number of dental hygiene programs accredited by CODA, a request for increasing the number of dental hygienists on the CODA would seem reasonable; however, the Criteria for Recognition do not provide a means or allow the Department to mandate ADA internal policies and procedures regarding the appointment of individuals to the CODA. The Criteria for Recognition only establish the composition requirements for decision-making bodies as discussed in 602.15(a)(4) and 602.15(a)(5). In addition, as a programmatic accreditor, CODA is not subject to the separate and independent requirements of 602.14 (b). Therefore, the ADA's policies regarding its appointment of individuals to the CODA do not conflict with the Criterion for Recognition. The ADHA has not provided sufficient documentation that would indicate dentists on the CODA skewed decision-making in favor of organized dentistry as discussed in the written comments or that a conflict of interest exists relative to the number of dental hygienists serving on the CODA.

The written comments submitted by the ADHA related to accreditation and preaccreditation standards and the application of standards in making decisions concern the CODA's process for developing new accreditation standards for

dental therapy education programs. ADHA contends that CODA elected to develop and circulate draft standards for a non-dental hygiene track dental therapy program, but chose not to develop and circulate draft standards for a dental hygiene based dental therapy program in spite of the fact that there were requests made for both a non-dental hygiene track program and a dental hygiene track program. This process is still underway, and the ADHA notes in its comments that CODA has agreed to seek input from the dental hygiene community on its proposed standards. Furthermore, these comments do not relate to any of the criteria that are addressed in the CODA's compliance report. The Federal Register Notice inviting written comments states explicitly that comments are limited to criteria under review in consideration of the compliance report.